PART B - FEE(S) TRANSMITTAL						
III I A HARE	this form, togother w		or Fa	Commissioner fo P.O. Box 1450 Alexandria, Virg ax (571)-273-2885	r Patents inia 22313-1450	
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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 07733 7590 06/21/2006 WALKER & JOCKE, L.P.A. 231 SOUTH BROADWAY STREET MEDINA, OH 44256				Note: A certificate of Fee(s) Transmittal. The papers. Each additional have its own certificate	mailing can only be used is certificate cannot be used al paper, such as an assignme of mailing or transmission.	for domestic mailings of the for any other accompanying nent or formal drawing, must
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						(Depositor's name) (Signature) (Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVEN		VENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/620,965 07/15/2003 Jay A. Vorndran AMCOR-003 9700 FITLE OF INVENTION: METHOD OF APPLYING FLUX TO MOLTEN METAL 87/24/2006 CNGUYEN1 00000379 100637 10620965 01 FC:2501 700.00 DA 02 FC:4001 15 00 DO						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$0	\$700	09/21/2006
EXAMINER			ART UNIT CLASS-SUBCLASS			
WYSZOMIERSKI, GEORGE P		1742 075-304000				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government						
A check in the amount of the fee(s) is enclosed: A ch					closed.	· · · · · · · · · · · · · · · · · · ·
a. Applicant claims S	(from status indicated above MALL ENTITY status. See is requested to apply the Issu) 37 CFR 1.27.	☐ b. Applicant i	s no longer claiming SMA	LL ENTITY status. See 37 (CFR 1.27(g)(2).
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Authorized Signature					19/2006	
Typed or printed name RALPH E. JOCKE Registration No. 31, 029 This collection of information is required by 37 CFR 1311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process)						

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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